

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FEE USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

10/08/08

Brooker

AS FILED	CLAIMS			
	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
IND.	DER.	IND.	DER.	
1	1	1	1	
2	1	1	1	
3	3	1	1	
4	1	2	2	
5	1	2	2	
6	1	2	2	
7	1	2	2	
8	1	2	2	
9	1	2	2	
10	1	2	2	
11	1	2	2	
12	1	2	2	
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44	1	2	2	
45	1	2	2	
46	1	2	2	
47	1	2	2	
48	1	2	2	
49	1	2	2	
50	1	2	2	
TOTAL IND.	3	7	10	
TOTAL DER.	1	1	1	
TOTAL CLAIMS	3	7	10	

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS